have been regularized with effect from the date of Ins initial appointment. The matter as to whether or not same benefits can be granted to other similarly placed officers is being examined in consultation with Department of Personnel and Training.

**Health mobile vans for poor people**

1514. PROF. MM. AGARWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether there is any proposal *to set-up* health mobile vans for poor people living in Jhnggis-Jbonpries in Delhi;

(b) it to, the details thereof;

(c) if not, the reasons therefor; and

(d) the steps taken/proposed to be taken by Government in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to (d) The Government of NCT of Delhi has informed that they are already providing 64 mobile health vans for poor people residing in 430 large Jhuggi Jhonpri dusters. The efforts are underway *to* augment the system further.

**Increase in death rate of children**

† 1515. SHRI P.K. MAHESHWARI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased *to state:*

(a) whether Government's attention has been drawn towards continuous increase in the death rate among children;

(b) if *so,* the reaction of Government *thereto-,* and

(c) the steps taken, so far, by Government to save these children from untimely death?

† Original notice of the qocstkm was received in Hindi

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to (c) There is no increase in the death rate of children in the country. The Child (0-4) Mortality Rate (CMR) for the latest available three years as per the Sample Registration Survey (SRS), Registrar General of India (RGI) is as under:

| Year | CMR |
|---|---|
| 1996 | 23.9 |
| 1997 | 23.1 |
| 1998 | 22.5 |

Under the RCH Programme, immunization against six vaccine preventable diseases, facilities for appropriate management of acute respiratory infectious, Oral Rehydration Therapy (ORT) for management of diarrboeal diseases; and essential newborn care services are provided. Promotion of exclusive breastfeeding and appropriate complementary feeding practices, and prophylaxis against Vitamin-A and Iron-deficiencies are also being provided to improve the nutritional status of children.

Schemes have been launched in weaker districts to improve the access of the people to Reproductive and Outreach Scheme, RCH Camps, Dai Training and Border District Cluster Strategy Project which have been undertaken to effect further reduction in child mortality.

**Working of NGOs in health programmes**

1516. PROF. (SHRIMATT) BHARATI RAY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the details of the Non-Governmental Organisations engaged in implementation of health programmes in the country, State-wise;

(b) the details of the amount provided by Government to each organisation during the last three years. State-wise;

(c) whether these organizations submitted their accounts to the concerned authorities;